LOBBYING EXPENDITURE REPORT COVERING JANUARY 1 THROUGH JUNE 30 DUE AUGUST 15 COVERING JULY 1 THROUGH DECEMBER 31	1.obbyist's Registration Number
DUE FIGURUARY IS	FOR OFFICE USE ONLY Postmark Date: 2-16-02
■ Print in ink or type.	Erz
 Fill in Registration Number in spaces provided. Complete form and return to the Board of Ethics, 2415 Quail Dr., 3rd Baton Rouge, LA 70808 (225) 763-8777 or (800) 842-6630. This form must be delivered or postmarked by the due date. This form may be faxed to (225) 763-8787. 	Plour, 10.2377
1. Name_Stermel George	M1.
2. Business Address 15453 Patricia Pale	Dr Belonlous, 1A 70819
Mailing Address	
3. Business Phone 205 254-4387 Area Code and Telephone Number	
 Total of all expenditures made January 1 through hune 30 (include expenditures from Schedules A and B) 	s_ ~ <i>D</i> ~
 Total of all expenditures made July 1 through December 3 (When Applicable) (Include expenditures from Schedules A and B) 	1: \$0-
 Total of all expenditures made during calendar year; (Line 4 added with Line 5 should equal Line 6) 	\$
Did you make an expenditure exceeding \$50 on one occas	ion for any one legislator;
From July 1 through December 33?	E No II NA
If the answer to either question in Number 7 above is YES,	please complete Schedule A and at light.
超 超	
	FR 2844 12

Form 500 14-4, 10/02

LOBBYING EXPENDITURE REPORT

Lobbyist's Registration Number

-	Did you make expenditures exceeding					
	From January 1 through June 30?		Yes	No SZ No		
	From July 1 through December 31?		Yes	Sk. No		NA
	If the answer to either question in Nu	mber	8 above is	YES, please cor	nplete S	chedule A and attach,
9.	Did you expend funds for a reception, social gathering, or other function to which the entire legislature, either house, any standing committee, select committee, statutory committee, committee created by resolution of either house, subcommittee of any committee, recognized caucus, or any delegation thereof were invited during the reporting period?					
	□ Yes			D No		
	If the answer to Number 9 above is Y	ES,	please con	iplete Schedule I	Band eti	ach.
	The state of the s	ES,	please con	iplete Schedule I	Band et	ach.
				plete Schedule I <u>Pra</u> cc <u>uracy</u>	Sand eti	ech.
	CER	<u>ufic</u>	CATION C)F <u>A</u> CC <u>URACY</u>		S.
	CER I hereby certify that the information of	PIFI(CATION C	OF ACCURACY is true and corre	ct to the	best of my knowledge.
	CER	PIFIC contai	CATION C ined herein ble expend	OF ACCURACY is true and corre itures have been	ct to the	best of my knowledge, ed herein; and that no

Fami 602, Rev. 19119